GUAM BEHAVIORAL HEALTH AND WEI	LNESS CENTER	
TITLE: Review of Billing Statements and Claims	POLICY NO: AD-PA-04	Page 1 of 2
RESPONSIBILITY: Patient Affairs Business Office		
APPROVED BY: Marin DATE OF ORIGINAL SAPPROVAL: 9/		
THERESA C. ARRIOLA, DIRECTOR	LAST REVIEWED/REVISED:	
	F	* *

PURPOSE:

To provide a guideline in the medical billing claims process and quarterly review of representative sampling of the consumer records. This is to ensure that bills and insurance claims reflect the services that were provided and identify necessary corrective action.

POLICY

- A. It is the policy of the Guam Behavioral Health and Wellness Center (GBHWC) to accurately charge for services in accordance with the approved GBHWC Fee Schedule and other rules and/or regulations as applicable.
- B. The current GBHWC Fee Schedule was approved by Guam Public Laws: 31-239, 31-274 and 33-63, and is published on the GBHWC Encounter Form with each fee listed individually by description, medical and revenue codes. It shall be reviewed at least annually or at a frequency set by law.
- C. A quarterly internal audit/review of the representative sampling of the consumer records, insurance claim and billing statements of the services rendered and charged, shall be conducted to assure appropriateness of billing and coding practices, accuracy and consistency guided by public law or best industry standards.
- D. Consumers without medical insurance and eligible for public assistance are referred to the Guam Department of Public Health and Social Services.

RESPONSIBILITY

Patient Affairs Business Office:

- 1. Prepares the bill and/or insurance claim that contains demographic information, diagnosis, and appropriate medical codes that accurately support payment for service(s).
- 2. Conducts quarterly review of representative samples of bills of the consumers; whether bills are accurate and appropriate, and checks areas needing improvement.

PROCEDURE:

- A. The bill or insurance claim is scanned into the Patient Affairs Repository.
- B. The week after the end of each quarter of the fiscal year, representative sample random bills are extracted from the repository and reviewed to determine the following:
 - 1. The dates of services provided coincide with billed episodes of care.
 - The bills accurately reflect the services that were provided through the use of industry standard coding i.e., Current Diagnostic and Statistical Manual of Mental Disorder and International Classification of Diseases-10 (ICD-10), Current Procedural Terminology Codes (CPT).
 - 3. The necessary corrective action is identified and taken.
- C. A quarterly report of the findings shall be provided to the management meeting and will address the following;
 - 1. Whether bills are accurate,
 - 2. Trends
 - 3. Areas needing improvement
 - 4. Actions to be taken

SUPERSEDES

AD-F-07 Review of Billing Statements and Claims 9/22/2017; Director Rey Vega.

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REVIEW AND ENDORSEMENT CERTIFICATION

The signatories on this document acknowledge that they have reviewed and approved the following:

Policy Title: Review of Billing Statements and Claims

Policy No: AD-PA-04 Initiated by: Patient Affairs

Date	Signature	
6-16-2020	Marilyn Aflague	-
	Marilyn Aflague Administrative Services Officer	
Date	Signature	
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	Ms. And Unringco LCSW,LPC Child Adolescent Services Division Administrator	F 19
Date	Signature	
6/17/2020	Penw R. Sa	
	Reina Sanchez M.A Clinical Administrator	
Date	Signature	
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	Dr. Ariel Ismael Medical Director	
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